Appendix A: Questionnaire



U.S. Department of Veterans Affairs Veterans Benefits Administration

SURVEY OF VETERANS SATISFACTION with the VA VOCATIONAL REHABILITATION AND COUNSELING PROGRAM

Thank you for your help with this important project. This booklet contains questions about your recent experience with VA's Vocational Rehabilitation and Counseling (VR&C) Program. Please base your answers only on your most recent experience with this program (Chapter 31).

Please read and answer the following question first.

According to their records, VA shows that you are currently participating in VA's Vocational Rehabilitation and Counseling Program (VR&C), OR have participated in the past. Is this true?

○ No (STOP. You do not have to complete the rest of this questionnaire, but please return the questionnaire in the enclosed postage-paid envelope.)

○ Yes (Continue on to next question.)

According to their records, VA shows that you are CURRENTLY in OR HAVE BEEN in the employment services (job search) phase of the program. Is this true?

○ No (STOP. You do not have to complete the rest of this questionnaire, but please return the questionnaire in the enclosed postage-paid envelope.)

○ Yes (Continue to instructions on the next page of the booklet, complete the rest of the questionnaire as soon as possible, and mail it in the enclosed postage-paid envelope.)

Again, we thank you for helping VA provide better service to veterans.

INSTRUCTIONS

The survey will take about 15 minutes to complete.

Please read each question carefully and respond by filling in the oval of the response that most closely represents your opinion.

Correct Mark

○○●○

Incorrect Marks

②○●○

- Use pencil or pen. Make heavy dark marks that fill the ovals completely. If you wish to change an answer, erase cleanly (pencil), or put an "X" over the incorrect response (pen).
- Fill in <u>one</u> answer circle for each question unless it tells you to "*mark all that apply*". (See example below)
- When you are finished, please place the questionnaire in the enclosed postage-paid envelope and put it in the mail.

Example:

- 34. Were you generally able to get the information you needed on the first call or contact?
 - Yes

Please watch for "SKIP" instructions—they tell you when to skip over a group of questions that you do not need to answer.

OMB Control Number 2900-0569 Public Reporting Burden Statement

VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. All responses are voluntary. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any aspects of this collection of information, call 1-(800)-827-1000 for mailing information on where to send your comments.

Please answer the following questions in reference to your <u>current</u> or <u>most recent</u> experience with the VR&C program. Even if you are not currently participating in the program, please answer based on your most recent experience.

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5. How satisfied are you with the occupational/ vocational goal you and your counselor selected during the planning phase of your program?

BACKGROUND INFORMATION ABOUT YOUR VOCATIONAL REHABILITATION PROGRAM

Did your vocational rehabilitation program include an education/training phase?	 ○ Very satisfied ○ Somewhat satisfied ○ Neither satisfied nor dissatisfied ○ Somewhat dissatisfied ○ Very dissatisfied
 Yes (GO ON to Q 2) No (SKIP to Q 5) 2. What type of education/training was this?	Did (Do) you have an employment services specialist or counselor assigned to you during the employment services (job search) phase of your program?
College or university classesTechnical or vocational trainingOn-the-job training	 Yes (GO ON to Q 7) No (SKIP to Q 39, page 5) Don't know (SKIP to Q 39, page 5)
Have you completed the education/training phase of your program?	7. Who is (was) your primary specialist or counselor assigned during your job search?
○ Yes (GO ON to Q 4)○ No (SKIP to Q 5)	 A VA staff specialist (GO ON to Q 8) A specialist under contract with VA (GO ON to Q 8) A Disabled Veterans Outreach Program (DVOP) counselor (SKIP to Q 39, page 5)
4. How long has it been since you completed the educational/training phase of your vocational rehabilitation program?	○ Don't know <i>(GO ON to Q 8)</i>
 Less than 3 months 3 months to 6 months More than 6 months to 1 year More than 1 year to 18 months More than 18 months to 2 years More than 2 years to 3 years More than 3 years 	8. Is this the same specialist/counselor who was assigned to you during the training or educational phase of your program? Yes No Don't know Didn't have training/educational phase

Please answer the following questions in reference to your <u>current</u> or <u>most recent</u> experience with the VR&C program. Even if you are not currently participating in the program, please answer based on your most recent experience.

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12. Which of the following potential employment opportunities or referrals has your counselor provided? (Mark all that apply.)

KNOWLEDGE AND USE OF EMPLOYMENT SERVICES

9. How completely did your counselor explain all the benefits and services available to you during the employment services phase of your program? Completely Mostly Somewhat Only a little Not at all	 Referrals to state rehabilitation and employment agencies Referrals to private employment specialists Referrals to potential employers Referrals to federal job market References to an electronic job bank on the Internet Referrals to other sources of assistance Direct job placement None
10. Have you and your counselor developed a plan (Individualized Employment Assistance Plan) to guide you in your job search?	13. Other than your counselor, which other sources of employment information have you used? (Mark all that apply.)
 Yes No, but in the process of developing such a plan No Don't know 	 VHA (Veterans Health Administration) VET Center DVOP (Disabled Vets Outreach Program) DOD (Department of Defense) SBA (Small Business Administration) State rehabilitation agencies State employment agencies
11. Which of the following types of employment services has your counselor provided? (Mark all that apply.)	 Private employment specialists Internet job searches Newspaper/help-wanted advertisements Job fairs
 Resume preparation or development Interview skills Help in obtaining licenses or certificates Job hunting strategies Grooming/personal appearance tips None 	College/university or school Personal/professional contacts Federal job listings None

Please	answer the	following	questions .	in referenc	e to your	current or	r <u>most recer</u>	<u>ıt</u> experienc	e with the	VR&C pr	ogram.
Even if	you are not	currently	participatii	ng in the pi	rogram, p	olease ans	wer based o	on your mos	t recent e	xperience	€.

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By filling in the appropriate circle, please indicate whether you Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, or Strongly Disagree with the following statements regarding your employment services specialist or counselor:

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	Strongly agree	Agree	Neither agree	O Disagree	Strongly disagree	O Not applicable	Cardinate Property
14. Your counselor gives you good information and advice	S O	0	0	a 0	<i>®</i> ₩	ν Ο	
15. Your counselor is knowledgeable regarding job search methods and techniques.	0	0	0	0	0	0	
16. Your counselor is knowledgeable regarding employment markets	0	0	0	0	0	0	
17. Your counselor has provided assistance according to your individual needs.	0	Ο	0	Ο	0	O	
18. Your counselor understands your vocational goals	0	0	0	0	0	0	
19. Your counselor shows a caring and compassionate attitude toward you	0	Ο	0	0	0	0	
20. Your counselor listens to your needs and concerns	0	0	0	0	0	0	
21. Your counselor has a communication style that is easy to understand	0	0	0	0	0	0	
22. Your counselor is flexible.	0	0	0	O	0	0	
23. Your counselor is resourceful.	0	0	0	0	0	0	
24. Your counselor is available when needed	0	0	0	0	0	0	
25. Your counselor is concerned about the quality of your job placement	0	0	0	0	0	0	

Please answer the following questions in reference to your <u>current</u> or <u>most recent</u> experience with the VR&C program. Even if you are not currently participating in the program, please answer based on your most recent experience.____

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CONTACT WITH YOUR COUNSELOR

26. Do you have scheduled in-person meetings with your counselor?	31. Aside from scheduled visits, what is the primary method you use to contact your counselor?
Yes (GO ON to Q 27)No (SKIP to Q 31)	 Phone, 1-800 number Phone, long-distance number Phone, local number Fax E-mail (computer)
 27. Are the number and length of these sessions adequate to meet your counseling needs? Yes No, too little contact with counselor No, too much contact with counselor 	 Letter Unannounced visit Did not need additional communication (SKIP to Q 37, page 5)
28. In general, how much of what you NEEDED TO KNOW did you get from these meetings? All Most Some Little None	32. How responsive was your counselor to your contact through this method? Very responsive Somewhat responsive Neither responsive nor unresponsive Somewhat unresponsive Very unresponsive
29. How convenient is the LOCATION where these meetings are held? Very convenient Somewhat convenient Neither convenient nor inconvenient Somewhat inconvenient Very inconvenient	33. In general, how much of what you NEEDED TO KNOW did you get from this method of contact? All Most Some Little None
 30. In general, how convenient is the TIME scheduled for these meetings? Very convenient Somewhat convenient Neither convenient nor inconvenient Somewhat inconvenient Very inconvenient 	34. Were you generally able to get the information you needed on the first call or contact? Yes No 35. Were you able to access voice mail in order to leave your counselor a message? Yes, counselor returned call Yes, counselor did not return call No, not able to access voice mail Never tried

Please answer the following questions in reference to your current or most recent experience with the VR&C program	m
Even if you are not currently participating in the program, please answer based on your most recent experience.	

			Page 5
36.	Does your counselor fully address all your questions, concerns, or complaints? Yes No	41.	How long did it take from the time you completed the educational/training phase of your vocational rehabilitation program until you started your current job?
	O Did not have any		Less than 1 month1 month to 2 monthsMore than 2 months to 3 months
37.	Did your counselor provide assistance throughout your job search?		 More than 3 months to 4 months More than 4 months to 5 months More than 5 months to 6 months
	○ Yes○ No○ Did not need job search assistance		 More than 6 months to 1 year More than 1 year to 18 months More than 18 months to 2 years More than 2 years to 3 years More than 3 years
38.	Did you counselor monitor your progress throughout your job search?		 Started current job before completing educational/ training phase Never completed educational/training phase
	○ Yes ○ No		Never had educational/training phase
		42.	How REASONABLE was the length of time it took you to find a job?
	CURRENT EMPLOYMENT STATUS		 Very reasonable Somewhat reasonable Neither reasonable nor unreasonable
39.	What is your current employment status? Currently employed*, not looking for a different job		○ Somewhat unreasonable○ Very unreasonable
	(GO ON to Q 40) ○ Currently employed*, but looking for a different job	43.	Does this job meet your rehabilitation needs?
	(GO ON to Q 40) ○ Not working but looking for work (SKIP TO Q 47, page 6) ○ Not working and not looking for work (SKIP TO Q 47, page 6)		○ Yes ○ No
	*includes full-time, part-time, or self employed		Does this job suit your skills and abilities? ○ Yes ○ No
	Has the VA's Vocational Rehabilitation Program determined that you are suitably employed?		
	YesNoDon't know		Does this job match the occupational/vocational goal you and your counselor selected during the planning phase of your program? Yes
	,		○ No

Please answer the following questions in reference to your <u>current</u> or <u>most recent</u> experience with the VR&C progra	ìт.
Even if you are not currently participating in the program, please answer based on your most recent experience.	

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46. How helpful was your employment specialist/ counselor in helping you find your current job?	CURRENT STATUS IN THE VR&C PROGRAM
 Very helpful Generally helpful Moderately helpful Somewhat helpful Not at all helpful Didn't need help 	 50. How would you best describe your current status with regard to the VA VR&C program: VA requested I interrupt program (GO ON to Q 51) VA requested I withdraw from program (GO ON to Q 51)
47. Looking back to your contacts with the VR&C program thus far, which methods of contact did you EVER use? (Mark all that apply.)	 I voluntarily interrupted program (SKIP to Q 52) I voluntarily withdrew from program (SKIP to Q 52) I am currently pursuing program (SKIP to Q 54, page 7) I have completed the program (SKIP to Q 54, page 7)
 ○ In-person visit ○ Phone, 1-800 number ○ Phone, long-distance number ○ Phone, local number ○ Fax ○ Internet, e-mail, or website ○ Letter ○ None 	51. Did VA tell you the reasons why you were interrupted or withdrawn from the VR&C employment services program? Yes No Don't Know
 48. In general, how easy was it for you to obtain information from the VR&C program? Very easy Somewhat easy Neither easy nor difficult Somewhat difficult Very difficult 49. Which method of contact with the VR&C program would you prefer, if you could get the same degree of service? (Mark only one.) Local in-person visit Phone, 1-800 number Phone, long-distance number Phone, local number Fax Internet, e-mail, or website Letter 	 52. Why did you interrupt or withdraw from the VR&C employment services program (Mark all that apply.) Medical problems Disability Financial difficulties VA requested that I interrupt or withdraw from program Found job on my own Too much red tape Employment services were not helpful Moved/planning to move Family responsibilities/difficulties Program did not meet my needs Problems with counselor 53. Do you plan to complete your rehabilitation program now or at some later date? Yes No
	○ No○ Not sure

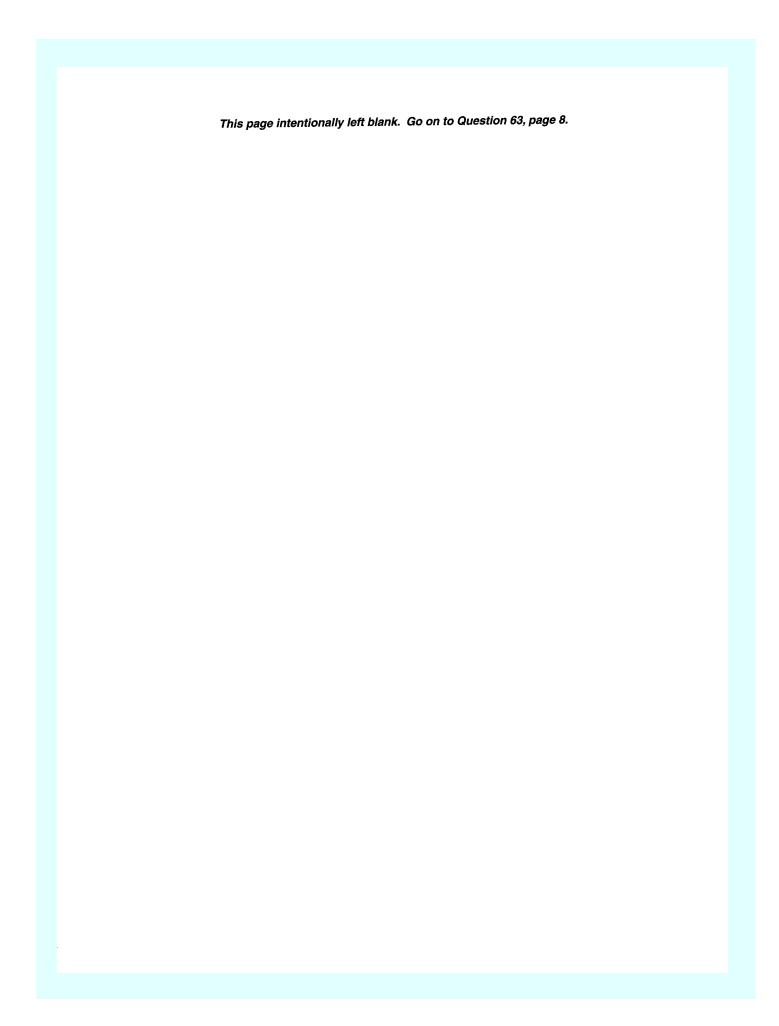
Please answer the following questions in reference to your <u>current</u> or <u>most recent</u> experience with the VR&C program. Even if you are not currently participating in the program, please answer based on your most recent experience.

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59. Overall, how satisfied are you with VA's VR&C

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	program:
 54. Thus far, how well has the VA's VR&C program met your expectations? Much better than expected Better than expected Just as expected Worse than expected Much worse than expected 	 Very satisfied Somewhat satisfied Neither satisfied nor dissatisfied Somewhat dissatisfied Very dissatisfied 60. Which of the following VR&C services were the most helpful? (Mark all that apply.)
 55. Overall, did the VR&C program meet your rehabilitation needs? Yes No No 56. Have your CAREER goals been raised, lowered, or unaffected as a result of your interaction with the VR&C program? 	 Evaluation, testing and planning your rehabilitation program Payment of tuition, fees, books, supplies and/or monthly subsistence Personal contact with counselor(s) Identification of medical and other rehabilitation issues Education/training Help in finding a job None
 ○ Raised ○ Lowered ○ Unaffected 57. Are your career goals more realistic as a result of the program?	61. Which of the following VR&C services did you need the most? (Mark all that apply.) © Evaluation, testing and planning your rehabilitation program © Payment of tuition, fees, books, supplies and/or monthly subsistence © Personal contact with counselor(s)
○ Yes○ No○ Don't know	 Identification of medical and other rehabilitation issues Education/training Help in finding a job None
58. At this time, would you say that your career goals have been met? Yes No Don't know	62. Would you recommend this program to other disabled veterans? Yes No



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Do you ha	ave any additional comme	ents concerning how	w VA could improve	e its Vocational Reh	abilitation
Program?	(To maintain confidentiality	y, please do <u>not</u> inclu	de your name, addre	ess, social security n	umber, or any
other ident	tifying information.)				
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Thank you for taking the time to complete the survey. Your answers are very important to us. Please place the questionnaire in the enclosed postage-paid envelope and return it to:

Questar P.O. Box 64672 St. Paul, MN 55164-9522